## CLAIMS ONLY

SERIAL NO. FILING DATE 10042417 APPLICANT(S)

CLAIMS

|               | AS FILED |  |              | TER<br>NDMENT                                    | AFTER 2nd AMENDMENT |      |
|---------------|----------|--|--------------|--|---------------------|------|
|               | IND.     | DEP.   | IND.         | DEP.   | IND.                | DEP. |
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| 3             |          | 1  |              |  |                     |      |
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| 32            |          |  |              |  |                     | -    |
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| 50<br>TOTAL   | -        |  |              |  |                     | ,    |
| TOTAL<br>IND. | 3 6      | ] D  |              | <u></u>  |                     | Û    |
| TOTAL<br>DEP. | 6        |  |              | <b>(</b>   |                     | Ō    |
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| 54                      |             |          |          |  |      |      |
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| 79                      |             |          |          |  |      |      |
| 80                      |             |          |          |  |      |      |
| 81                      | <u>-</u>    |          |          | -  |      |      |
| 82                      |             |          |          | $\vdash$   |      |      |
| 83<br>84                |             |          |          | ļ  |      |      |
| 85                      |             |          |          |  |      |      |
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| 86<br>87                |             |          |          | ļ  |      |      |
| 88                      |             |          |          | -  |      |      |
| 89                      |             |          |          |  |      |      |
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| TOTAL                   |             |          |          | † <u>-</u> -                                     | _    |      |
| IND.                    | <u> </u>    | <u></u>  |          | ا ل  |      |      |
| TOTAL<br>DEP.           |             |          |          |  |      |      |
| DEP.<br>TOTAL<br>CLAIMS |             | , ,      |          | 32   |      |      |
|                         |             |          |          |  |      |      |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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